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November 17, 2000 Date of Deposit

I hereby certify that this Transmittal Letter, enclosed application and any other documents referred to as enclosed herein, are being deposited in an envelope with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR \$1.10 on the date indicated above and addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Deborah Brockmeyer

(Print Name of Person Mailing Application)

Debora MacT Meyer
(Signature of Person Mailing Application)

Transmittal of Utility Patent Application for Filing Under 37 CFR §1.53(b)

Box Patent Application Assistant Commissioner for Patents Washington, D.C. 20231

Sir

Transmitted herewith for filing is a utility patent application by inventors: Patrick Rivelli, Jr. entitled:

NEUROVASCULAR STENT AND METHOD

1. Enclosed are:

- Certificate of Express Mail.
- \boxtimes One utility patent application containing text pages 1-17 and \boxtimes 7 Sheets of drawings.
- □ Declaration of inventorship (unsigned)
- ☐ Executed Power of Attorney by Assignee
- Sequence listing printout, diskette, and matching declaration.

2. U.S. Priority

- This application claims priority of U.S. Provisional Patent Application Serial No. 60/241,101 filed on October 16, 2000, expressly incorporated in its entirety herein by reference.
- A petition for extension of time has been filed in the parent to extend the pendency of the parent to * (copy enclosed).

3. Foreign Priority

- Priority of Application No. * filed in * on * is claimed under 35 USC \$119.
- A certified copy of this priority document is enclosed.



The filing fee has been calculated as shown below:

	(Col. 1) (Col. 2)		Small Entity		T	Other Than a Small Entity	
For:	No. Filed	No. Extra	Rate	Fee		Rate	Fee
Basic Fee				\$355.00	or		\$710.00
Total Claims	17 - 20	0	0 x \$ 9 =	\$ 00.00	or	x \$ 18 =	\$
Independent Claims	3 - 3	0	0 x \$40 =	\$ 00.00	or	x \$ 80 =	\$
☐ Multiple Dependent Claim Presented			+ \$135 =	\$	or	+ \$270 =	\$
* If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$355.00	Or	TOTAL	\$

- Applicant claims small entity status. See 37 CFR §1.27
- \square A check for $\* is enclosed to cover the Filing Fee.
- $\hfill \square$ Please charge Deposit Account 04-0531 in the amount of $\$^{\star}_{-}.$
- ☐ The Commissioner is hereby authorized to charge fees under 37 CFR §1.16 and §1.17 which may be required, or credit any overpayment to Deposit Account 04-0531.
- Filing fee to be submitted in response to anticipated receipt of Notice to File Missing Parts of Application. DO NOT CHARGE DEPOSIT ACCOUNT.

Date: 1/-17-2000

/ MU / . /M

Peter J. Dehlinger Registration No. 28,006

Respectfully submitted,

Correspondence Address:

Customer No. 22918 Phone: 650-324-0880